ARTICLES OF DISSOLUTION (BY SHAREHOLDERS)

Wyoming Secretary of State The Capitol Building, Room 110 200 W. 24th Street Cheyenne, WY 82002-0020 Phone (307) 777-7311/7312 Fax (307) 777-5339 E-mail: corporations@state.wy.us

1.	The name of the corporation is:	
2.	The date dissolution was authorized:	
3.	If disso	olution was approved by the shareholders:
	a.	The number of votes entitled to be cast on the proposal to dissolve:
	b.	The total number of votes cast for the dissolution: and the number of votes cast against the dissolution:
		<u>OR</u>
		The total number of undisputed votes cast for dissolution:
		The number of votes cast for dissolution was sufficient for approval.
Date:		Signed:
Title:		
****	*****	**********************
Filing	Fee: \$5	50.00
Instruc	tions:	
	1.	The document may be executed by Chairman of the Board, President or another of its officers.

The document shall be accompanied by one (1) exact or photo copy.

2.